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APR 04 2007

DATE: April 4, 2007

PTO IDENTIFIER: Application Number 10/781,014-Conf. #2283
Patent Number

Inventor: Markus POMPEJUS et al.

MESSAGE TO: US Patent and Trademark Office

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FROM: LAHIVE & COCKFIELD, LLP
Maria Laccotripe Zacharakis, Ph.D., J.D.

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Attorney Dkt. #: BGI-126CPCN

PAGES (Including Cover Sheet): 7

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PTO/SB/21 (08-06)

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FORM

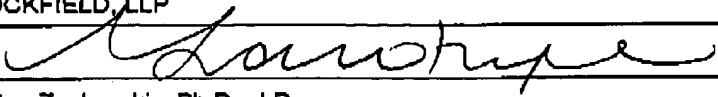
(to be used for all correspondence after initial filing)

Total Number of Pages In This Submission	Application Number	10/781,014-Conf. #2283
	Filing Date	February 17, 2004
	First Named Inventor	Markus POMPEJUS
	Art Unit	1652
	Examiner Name	C. L. Fronda
	Attorney Docket Number	BGI-126CPCN

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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	Remarks	

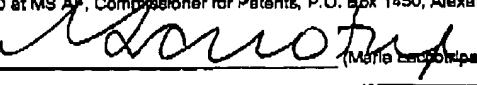
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Firm Name	LAHIVE & COCKFIELD, LLP		
Signature			
Printed name	Maria Laccotripe Zacharakis, Ph.D., J.D.		
Date	April 4, 2007	Reg. No.	56,268

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PTO/SB/17 (02-07)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2007** Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 1,520.00)**Complete If Known**

Application Number	10/781,014-Conf. #2283
Filing Date	February 17, 2004
First Named Inventor	Markus POMPEJUS
Examiner Name	C. L. Fronda
Art Unit	1652
Attorney Docket No.	BGI-126CPCN

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 12-0080 Deposit Account Name: Lahive & Cockfield, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues) 50 25

Each independent claim over 3 (including Reissues) 200 100

Multiple dependent claims 360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)

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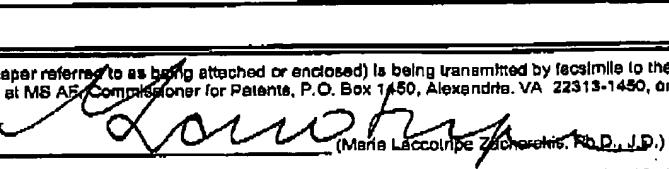
Non-English Specification, \$130 fee (no small entity discount)	1,020.00
Other (e.g., late filing surcharge): 1253 Extension for response within third month	500.00
1401 Notice of appeal	

SUBMITTED BY

Signature		Registration No. 58,266	Telephone (817) 227-7400
Name (Print/Type)	Maria Laccotripe Zacherakis, Ph.D., J.D.	Date April 4, 2007	

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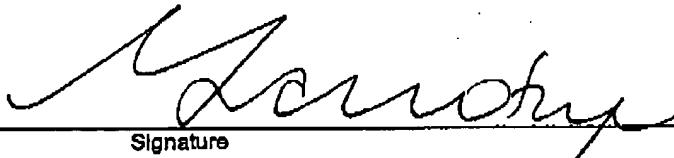
Application No. (if known): 10/781,014

Attorney Docket No.: BGI-128CPCN

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